



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Contract Health System (ACHS)

Patch 7 Addendum

**Version 3.1 Patch 7
December 2003**

**Information Technology Support Center
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Albuquerque, New Mexico**

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1.0 Introduction

Please review these changes and add a copy of them to any printed documentation your site may be using for ACHS 3.1. These changes will be integrated into future versions of the software and user manuals and will no longer be considered an addendum at the time of the next release.

Patch 7 of the Contract Health System contains following changes:

- A new option for applying electronic signatures to a contract health purchase order.
- A new option for viewing purchase orders with electronic signatures by the Ordering Official as well as purchase orders pending electronic signature by the Ordering Official.

This document also contains Patch 5 and 6 addendum information for ease of use.

Patch 6

Patch 6, released in June of 2003, contained the following changes:

- Added new options for Denial Appeals: Appeal Status Edit and Denial Status Edit. (Section 3.1 and 3.2)
- Added new option, Send Approval message to FI. (Section 3.3)

Note: For a full list of changes in patch 6, please refer to the patch 6 notes file.

Patch 5

Patch 5, released in November of 2002, contained the following HIPAA-related changes:

- A new 278 menu with a new X12 Transaction 278 Processing option (section 4.0)

Note: Patch 5 also contains a number of non-HIPAA related fixes and modifications. Please refer to the patch 5 notes file for a complete list of changes.

2.0 Patch 7

2.1 Add/Edit Electronic Signature Parameters

This option allows users to set up a facility to be able to apply an electronic signature to a CHS purchase order.

Adding and Editing Electronic Signature Parameters

1. Access the Contract Health Management System menu, as shown in Figure 2-1.

```
*****
*           Indian Health Service           *
*      CONTRACT HEALTH MGMT SYSTEM          *
*      Version 3.1, Jun 11, 2001            *
*****

UNSPECIFIED TRIBE HEALTH CLINIC

DOC   Document Generation ...
PAY   Pay/Edit Documents ...
PRT   Document Printing ...
ACC   Account Balances ...
PT    Patient Data
VEN   Provider/Vendor Data
DIS   Display Documents ...
DCR   Document Control Register
MGT   Facility Management ...
DEN   CHS Denial/Deferred Services ...
EMNU  Electronic Signature Authorization Menu ...
XXXX  CHS Programmer Utilities
Select Contract Health System Option:  MGT
```

Figure 2-1: Using the Contract Health Management System menu (Step 2)

2. Type MGT at the “Select Contract Health System Option:” prompt. The system displays the Facility Management menu, as shown in Figure 2-2.

```
CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Facility Management

PVD    Provider/Vendor Data
PR      Reports ...
PAD     Payment Adjustment
PED     Parameter Edit ...
ALU     Allowance Update
XPOR    Data Export ...
EOBR    Facility EOBR menu ...
CHEF    C H E F Management ...
HVP     High Volume Provider Menu ...
RES     Reset the error global ACHSERR
TUPD    Add/Edit CAN, CC, SCC ...
TVR     Test Version Switch

Select Facility Management Option: PED
```

Figure 2-2: Using the Facility Management menu (Step 3)

3. Type **PED** at the “Select Facility Management Option:” prompt. The system displays the Parameter Edit menu, as shown in Figure 2-3.

```
CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Parameter Edit

EOFF    Add or Edit Electronic Signature Officials
ESIT    Add or Edit Electronic Signature Parameters
LAB     Edit CHS Label spacing
MAIL    Edit CHS Mailing Address
NAME    Edit CHS Register Names
OBLI    Edit CHS Document Obligation Limits
OVER    Edit CHS Document Overpayment Allowances
PAR     Edit CHS Site Parameters
SIG     Edit CHS Document Signatures

Select Parameter Edit Option: ESIT
```

Figure 2-3: Using the Parameter Edit menu (Step 4)

4. Type **ESIT** at the “Select Parameter Edit Option:” prompt. The system displays the Add or Edit Electronic Signature Parameter options, as shown in Figure 2-4.

<p>CONTRACT HEALTH MGMT SYSTEM, 3.1 UNSPECIFIED TRIBE HEALTH CLINIC Add or Edit Electronic Signature Parameters</p> <p>Add a site to the CHS E-Sig Authority File. LOCATION: UNSPECIFIED UNS// <ENT> MULTIPLE SIGNATURES REQUIRED: YES// <ENT> E-SIG FEATURE ACTIVATION DATE: NOV 3,2003// <ENT></p>

Figure 2-4: Adding and Editing Electronic Signature Parameter options (Steps 5-7)

5. The name of your facility should appear as the default response at the "Location:" prompt. Press the Enter key to accept the default response.

Note: You cannot modify the default location from CHS. If the default location is incorrect, you must change the information through FileMan.

6. Type **Yes** at the "Multiple Signatures Required:" prompt to indicate that more than one signature is required for CHS purchase orders. The system will then require both ordering and authorizing signatures for blocks 21 and 23 of the purchase order form. When only one signature is appropriate for the location, type **No**, the system will then require only an ordering signature for block 21 of the purchase order form.
7. Type the date on which you want to activate the electronic signature capability for your facility at the "E-Sig Feature Activation Date:" prompt.

2.2 Add/Edit Electronic Signature Officials

This option allows designated individuals within the CHS program to add users to the CHS E-Sig Authority file as authorized electronic signature officials. Personnel who are signature officials are not limited to the CHS program.

Adding Electronic Signature Officials

1. Access the Contract Health Management System menu, as shown in Figure 2-5.

```

*****
*           Indian Health Service           *
*      CONTRACT HEALTH MGMT SYSTEM          *
*      Version 3.1, Jun 11, 2001            *
*****

UNSPECIFIED TRIBE HEALTH CLINIC

DOC   Document Generation ...
PAY   Pay/Edit Documents ...
PRT   Document Printing ...
ACC   Account Balances ...
PT    Patient Data
VEN   Provider/Vendor Data
DIS   Display Documents ...
DCR   Document Control Register
MGT   Facility Management ...
DEN   CHS Denial/Deferred Services ...
EMNU  Electronic Signature Authorization Menu ...
XXXX  CHS Programmer Utilities
Select Contract Health System Option:  MGT

```

Figure 2-5: Using the Contract Health Management System menu (Step 2)

2. Type **MGT** at the “Select Contract Health System Option:” prompt. The system displays the Facility Management menu, as shown in Figure 2-6.

```

CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Facility Management

PVD   Provider/Vendor Data
PR    Reports ...
PAD   Payment Adjustment
PED   Parameter Edit ...
ALU   Allowance Update
XPOR  Data Export ...
EOBR  Facility EOBR menu ...
CHEF  C H E F Management...
HVP   High Volume Provider Menu ...
RES   Reset the error global ACHSERR
TUPD  Add/Edit CAN, CC, SCC ...
TVR   Test Version Switch

Select Facility Management Option:  PED

```

Figure 2-6: Using the Facility Management menu (Step 3)

3. Type **PED** at the “Select Facility Management Option:” prompt. The system displays the Parameter Edit menu, as shown in Figure 2-7.

```

CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Parameter Edit

EOFF  Add or Edit Electronic Signature Officials
ESIT  Add or Edit Electronic Signature Parameters
LAB   Edit CHS Label spacing
MAIL  Edit CHS Mailing Address
NAME  Edit CHS Register Names
OBLI  Edit CHS Document Obligation Limits
OVER  Edit CHS Document Overpayment Allowances
PAR   Edit CHS Site Parameters
SIG   Edit CHS Document Signatures

Select Parameter Edit Option: EOFF

```

Figure 2-7: Using the Parameter Edit menu (Step 4)

4. Type **EOFF** at the “Select Parameter Edit Option:” prompt. The system displays the Add or Edit Electronic Signature Officials options, as shown in Figure 2-8.

```

CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Add or Edit Electronic Signature Officials

Add or Edit entries in the CHS E-Sig Authority File for UNSPECIFIED
TRIBE HEALTH CLINIC.
Users must have a written Delegation of Authority to sign
Contract Health Services Purchase Orders.

LOCATION: UNSPECIFIED UNS// <ENT>
Select USERS NAME: DEMO, USER// TEST, USER
Are you adding 'DEMO,USER' as a new AUTHORIZED USER (the 4TH for this CHS E-
SIG AUTHORITY)? No// Y (Yes)
USERS NAME: TEST, USER// <ENT>
LEVEL OF AUTHORITY: 100000//
ACTIVATION DATE: OCT 30,2003//
INACTIVATED DATE: <ENT>
ORDERING OFFICIAL: YES// <ENT>
AUTHORIZING OFFICIAL: YES// <ENT>
Select USERS NAME:

```

Figure 2-8: Adding and editing the Electronic Signature Officials options (Steps 5-12)

5. The name of your facility should appear as the default response at the “Location:” prompt. Press the Enter key to accept the default response. The CHS application will only let you modify your facility’s electronic signature capabilities.
6. Press the Enter key at the “Location:” prompt to accept the default location.

Note: You cannot modify the default location from CHS. If the default location is incorrect, you must change the information through FileMan.

7. Type the name of the appropriate user at the “Select Users Name:” prompt.

Note: Users who are authorized to enter electronic signatures on purchase orders must have system access to the CHS package at that particular facility.

8. Type the amount of financial authority associated with the indicated user at the “Level of Authority:” prompt. This is the maximum dollar amount for which this individual can obligate funds. The individual will not be able to sign purchase orders above the indicated level of financial authority.
9. Type the date on which you want to activate this electronic signature capability at the “Activation Date:” prompt.
10. When a user is no longer authorized to sign CHS purchase orders, enter the date on which this authorization should be removed at the “Inactivation Date:” prompt. It is not recommended that a future date be entered in this field.
11. If the individual is authorized to sign as the Ordering Official, type **Yes** at the “Ordering Official:” prompt.
12. If the individual is authorized to sign as the Authorizing Official, type **Yes** at the “Authorizing Official:” prompt. The Authorizing Official is normally a person who supervises the Ordering Official or might be a second tier in the procurement process.

Important: The ordering official and the authorizing official cannot be the same person on a purchase order.

When the Authorizing Official is not physically located at the facility, you must ensure that this individual has access to the CHS application at the facility.

13. Repeat steps 1-12 as necessary. When you are finished entering users, press the Enter key to return to the Parameter Edit Menu.

Note: There is no limit to the number of users that serve as Ordering or Authorizing Officials.

Important: In order for the electronic signature functionality to work properly, users must setup their electronic signature within the Tool Box option of RPMS and also include their titles.

2.3 Apply Electronic Signatures

This option allows authorized users to apply electronic signatures to a purchase order. Depending on the user’s authority, individuals can sign as Ordering Official or Authorizing Official.

Important: One person cannot sign as both Ordering Official and Authorizing Official on the same document.

The Ordering Official's signature must be placed first on the purchase order. The Authorizing Official's signature cannot be applied to a purchase order until the Ordering Official's signature is applied. If your facility requires only one signature, it must be that of the Ordering Official.

Important: All electronic signatures must be applied before printing the purchase orders or the signature blocks on the purchase order will be blank. Unsigned purchase orders can be signed and re-printed as necessary.

Note: An unsigned purchase order will not allow export of data to CORE or the fiscal intermediary, and will remain in the signature queue until it is signed or canceled.

2.3.1 Apply the Ordering Official Electronic Signature

This option allows Ordering Officials to apply electronic signatures to purchase orders within their authorization level.

Applying the Ordering Official Electronic Signature

1. Access the Contract Health Management System menu, as shown in Figure 2-9.

```

*****
*               Indian Health Service               *
*          CONTRACT HEALTH MGMT SYSTEM              *
*          Version 3.1, Jun 11, 2001                 *
*****

                                UNSPECIFIED TRIBE HEALTH CLINIC

DOC  Document Generation...
PAY  Pay/Edit Documents ...
PRT  Document Printing ...
ACC  Account Balances ...
PT   Patient Data
VEN  Provider/Vendor Data
DIS  Display Documents ...
DCR  Document Control Register
MGT  Facility Management ...
DEN  CHS Denial/Deferred Services ...
EMNU Electronic Signature Authorization Menu ...
XXXX CHS Programmer Utilities
Select Contract Health System Option:  EMNU

```

Figure 2-9: Using the Contract Health Management System menu (Step 2)

2. Type **EMNU** at the “Select Contract Health System Option:” prompt. The system displays the Electronic Signature Authorization menu, as shown in Figure 2-10.

```
CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Electronic Signature Authorization Menu

SIGA  Apply Electronic Signature Authorizing Official
SIGO  Apply Electronic Signature Ordering Official

Select Electronic Signature Authorization Menu Option:  SIGO
```

Figure 2-10: Using the Electronic Signature Authorization menu (Step 3)

3. Type **SIGO** at the “Electronic Signature Authorization Menu Option:” prompt. The system displays the Apply Electronic Signature Authorizing Official option, as shown in Figure 2-11.

```
CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Apply Electronic Signature Authorizing Official

Enter your Current Signature Code:  SIGNATURE VERIFIED
```

Figure 2-11: Entering your electronic signature (Step 4)

4. Type your electronic signature at the “Enter Your Signature Code:” prompt. The system verifies your signature and displays purchase orders within your level of authority.

Note: If you do not have an electronic signature on file, please contact your site manager.

```

OUTPUT BROWSER                      Nov 05, 2003 08:30:04                      Page: 1 of 3
DEMO, OFFICIAL                      Page 1
*** CONTRACT HEALTH MANAGEMENT SYSTEM ***

UNSPECIFIED TRIBE HEALTH CLINIC
Nov 05, 2003@08:30:04
Purchase Orders to be Approved

ITEM NO. PO No.      Vendor      Obligation Amt
=====
1      4-017-00013      OKLAHOMA CITY CLINIC      575.00
      CAN-OCC-SCC: J50AB75-4182-252D      Hospital
      DEMO,PATIENT

2      4-017-00015      CARDIOLOGY CONSULTANTS OF TOPEKA PA600.00
      CAN-OCC-SCC: J50AB75-4182-252D      Hospital
      DEMO,PATIENT

Enter ?? for more actions >>>
+ NEXT SCREEN      - PREVIOUS SCREEN      Q QUIT
Select Action: +// Q

```

Figure 2-12: Reviewing purchase orders and exiting the browser (Step 5)

- When you have reviewed the purchase orders, type **Q** at the “Select Action:” prompt to exit the browser. The system displays the electronic signature options, as shown in Figure 2-13.

```

Do you want ALL documents stamped with your Electronic signature ? N// <ENT>

Select the ITEM NO. that you DO NOT want your Electronic signature applied to :
(0-1000): 1,2,3
ARE YOU DONE? N// YES

```

Figure 2-13: Specifying purchase orders for approval (Steps 6-9)

- At the “Do You Want ALL Documents Stamped With Your Electronic Signature:” prompt, type **Yes** to approve all current purchase orders within your authorization level. Type **No** to indicate that certain purchase orders within your authorization level should not be signed.
- When you elect to withhold signature from some purchase orders, the system displays the “Select The ITEM NO. That You DO NOT Want Your Electronic Signature Applied To:” Prompt.
- Type the item number(s) associated with purchase orders you DO NOT want to sign at the “0-1000:” prompt.

Note: The numbers displayed in this prompt are set within the viewer for those items that are within your authorization level. When you elect to leave an item unsigned, it is removed from the view only. Unsigned purchase orders remain in the signature queue. To completely remove an unsigned purchase order from the signature queue, you must cancel the purchase order.

9. Type **Yes** at the “Are You Done?” prompt to indicate that you are done signing purchase orders. Type **No** to continue reviewing and signing purchase orders.
10. When you are finished signing purchase orders, the system displays the number of documents that received your electronic signature during this session, as shown in Figure 2-14.

OUTPUT BROWSER	Nov 05, 2003 08:39:26	Page: 1 of 1
4 DOCUMENTS APPROVED		
+ Enter ?? for more actions >>>		
+ NEXT SCREEN	- PREVIOUS SCREEN	Q QUIT
Select Action: +// Q		

Figure 2-14: Reviewing the total number of documents approved (Step 11)

11. Review this number for accuracy and type Q at the “Select Action:” prompt to exit the browser

2.3.2 Apply the Authorizing Official Electronic Signature

This option allows Authorizing Officials to apply electronic signatures to purchase orders within their authorization level. An Ordering Official must have already signed the purchase order in order for an Authorizing Official to be able to sign the purchase order.

Applying the Authorizing Official Electronic Signature

1. Access the Contract Health Management System menu, as shown in Figure 2-15.

```

*****
*               Indian Health Service               *
*      CONTRACT HEALTH MGMT SYSTEM                  *
*      Version 3.1, Jun 11, 2001                    *
*****

UNSPECIFIED TRIBE HEALTH CLINIC

DOC   Document Generation ...
PAY   Pay/Edit Documents ...
PRT   Document Printing ...
ACC   Account Balances ...
PT    Patient Data
VEN   Provider/Vendor Data
DIS   Display Documents ...
DCR   Document Control Register
MGT   Facility Management ...
DEN   CHS Denial/Deferred Services ...
EMNU  Electronic Signature Authorization Menu ...
XXXX  CHS Programmer Utilities
Select Contract Health System Option:  EMNU

```

Figure 2-15: Using the Contract Health Management System menu (Step 2)

2. Type **EMNU** at the “Select Contract Health System Option:” prompt. The system displays the Electronic Signature Authorization menu, as shown in Figure 2-16.

```

CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Electronic Signature Authorization Menu

SIGA  Apply Electronic Signature Authorizing Official
SIGO  Apply Electronic Signature Ordering Official

Select Electronic Signature Authorization Menu Option:  SIGA

```

Figure 2-16: Using the Electronic Signature Authorization menu (Step 3)

3. Type **SIGO** at the “Electronic Signature Authorization Menu Option:” prompt. The system displays the Apply Electronic Signature Authorizing Official option, as shown in Figure 2-17.

```

CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Apply Electronic Signature Authorizing Official

Enter your Current Signature Code:  SIGNATURE VERIFIED

```

Figure 2-17: Entering your electronic signature (Step 4)

4. Type your electronic signature at the “Enter Your Signature Code:” prompt. The system verifies your signature and displays purchase orders within your level of authority.

Note: If you do not have an electronic signature on file, please contact your site manager.

OUTPUT BROWSER	Nov 05, 2003 08:30:04	Page:	1 of 3
DEMO, OFFICIAL			Page 1

*** CONTRACT HEALTH MANAGEMENT SYSTEM ***

UNSPECIFIED TRIBE HEALTH CLINIC
Nov 05, 2003@08:30:04
Purchase Orders to be Approved

ITEM NO.	PO No.	Vendor	Obligation Amt
1	4-017-00013	OKLAHOMA CITY CLINIC	575.00
	CAN-OCC-SCC: J50AB75-4182-252D	Hospital	
	DEMO, PATIENT		
2	4-017-00015	CARDIOLOGY CONSULTANTS OF TOPEKA	PA600.00
	CAN-OCC-SCC: J50AB75-4182-252D	Hospital	
	DEMO, PATIENT		

Enter ?? for more actions >>>

+ NEXT SCREEN - PREVIOUS SCREEN Q QUIT

Select Action: +// Q

Figure 2-18: Reviewing purchase orders and exiting the browser (Step 5)

5. When you have reviewed the purchase orders, type Q at the “Select Action:” prompt to exit the browser. The system displays the electronic signature options, as shown in Figure 2-19.

Do you want ALL documents stamped with your Electronic signature ? N// <ENT>

Select the ITEM NO. that you DO NOT want your Electronic signature applied to :

(0-1000): 1,2,3

ARE YOU DONE? N// YES

Figure 2-19: Specifying purchase orders for approval (Steps 6-9)

6. At the “Do You Want ALL Documents Stamped With Your Electronic Signature:” prompt, type **Yes** to approve all current purchase orders within your authorization level. Type **No** to indicate that certain purchase orders within your authorization level should not be signed.
7. When you elect to withhold signature from some purchase orders, the system displays the “Select The ITEM NO. That You DO NOT Want Your Electronic Signature Applied To:” Prompt.
8. Type the item number(s) associated with purchase orders you DO NOT want to sign at the “0-1000:” prompt.

Note: The numbers displayed in this prompt vary based on the Purchase Order Item Numbers within your authorization level.

9. Type **Yes** at the “Are You Done?” prompt to indicate that you are done signing purchase orders. Type **No** to continue reviewing and signing purchase orders.
10. When you are finished signing purchase orders, the system displays the number of documents that received your electronic signature during this session, as shown in Figure 2-20.

OUTPUT BROWSER	Nov 05, 2003 08:39:26	Page: 1 of 1
4 DOCUMENTS APPROVED		
+ Enter ?? for more actions >>>		
+ NEXT SCREEN	- PREVIOUS SCREEN	Q QUIT
Select Action: +// Q		

Figure 2-20: Reviewing the total number of documents approved and exiting the browser (Step 11)

11. Review this number for accuracy and type Q at the “Select Action:” prompt to exit the browser.

2.4 Electronic Signature Reports

This option allows you to create reports that include either signed purchase orders or those purchase orders that are still pending an electronic signature. Both of these reports pertain to the Ordering Official’s signature only.

Creating and Viewing Electronic Signature Reports

1. Access the Contract Health Management System menu, as shown in Figure 2-21.


```

*****
*           Indian Health Service           *
*      CONTRACT HEALTH MGMT SYSTEM          *
*      Version 3.1, Jun 11, 2001            *
*****

UNSPECIFIED TRIBE HEALTH CLINIC

DOC   Document Generation ...
PAY   Pay/Edit Documents ...
PRT   Document Printing ...
ACC   Account Balances ...
PT    Patient Data
VEN   Provider/Vendor Data
DIS   Display Documents ...
DCR   Document Control Register
MGT   Facility Management ...
DEN   CHS Denial/Deferred Services ...
EMNU  Electronic Signature Authorization Menu ...
XXXX  CHS Programmer Utilities
Select Contract Health System Option:  MGT

```

Figure 2-21: Using the Contract Health Management System menu (Step 2)

2. Type **MGT** at the “Select Contract Health System Option:” prompt. The system displays the Facilities Management menu, as shown in Figure 2-22.

```

CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Facility Management

PVD   Provider/Vendor Data
PR    Reports ...
PAD   Payment Adjustment
PED   Parameter Edit ...
ALU   Allowance Update
XPOR  Data Export ...
EOBR  Facility EOBR menu ...
CHEF  C H E F Management...
HVP   High Volume Provider Menu ...
RES   Reset the error global ACHSERR
TUPD  Add/Edit CAN, CC, SCC ...
TVR   Test Version Switch

Select Facility Management Option:  PR

```

Figure 2-22: Using the Facilities Management menu (Step 3)

3. Type **PR** at the “Select Facility Management Option:” prompt. The system displays the Reports menu, as shown in Figure 2-23.

```

CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Reports

DSR    Document Status Report
CER    Expenditure Report
PSR    Document Summary Report
DSRF   Document Status Report By Fiscal Year
ERPT   Electronic Signature Reports ...
HOSP   Hospital Log
MEDI   Medical Data Reports ...
OPTC   Optional Comments Report
SCCR   Service Class Reports ...
THRD   CHS 3RD Party Payment
VRPT   Vendor Reports ...

Select Reports Option: ERPT

```

Figure 2-23: Using the Reports menu (Step 4)

4. Type ERPT at the “Select Reports Option:” prompt. The system displays the Electronic Signature Reports menu, as shown in Figure 2-24.

```

CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Electronic Signature Reports

ESAP   Electronic Signature approved by Ordering Official
ESPD   Pending Electronic Signature of Ordering Official

Select Electronic Signature Reports Option: ESAP

```

Figure 2-24: Using the Electronic Signature Reports menu

2.4.1 Electronic Signature Approved by Ordering Official

This option allows you to create reports that include purchase orders that have been approved by an Ordering Official in a specified date range.

```

CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Electronic Signature Reports

ESAP   Electronic Signature approved by Ordering Official
ESPD   Pending Electronic Signature of Ordering Official

Select Electronic Signature Reports Option: ESAP

```

Figure 2-25: Using the Electronic Signature Reports menu (Step 1)

Creating and Viewing Purchase Orders Approved by Ordering Official

1. From the Electronic Signature Reports menu, type **ESAP** at the “Select Electronic Signature Reports Option:” prompt. The system displays the Electronic Signature Approved by Ordering Official report options, as shown in Figure 2-26.

```
This report captures documents signed over a specific dates range.

Enter The BEGINNING E-SIG Date For The E-Signature Approved Report:  1001
(OCT 01, 2003)

Enter The ENDING E-SIG Date For The E-Signature Approved Report:  T  (NOV 05,
2003)
```

Figure 2-26: Entering Electronic Signature Approved by Ordering Official report options (Step 2)

2. Type the earliest date for which you want purchase orders to display at the “Enter the BEGINNING E_SIG Date for the E-Signature Approved Report:” prompt.
3. Type the latest date for which you want purchase orders to display at the “Enter the ENDING E_SIG Date for the E-Signature Approved Report:” prompt. The system displays the print/browse options available for this report, as shown in Figure 2-27.

```
Select one of the following:

      P          PRINT Output
      B          BROWSE Output on Screen

Do you want to : PRINT//  P
DEVICE: HOME//  <ENT>
```

Figure 2-27: Entering Print/Browse report options (Steps 4 and 5)

4. At the “Do You Want To:” prompt, type **P** to print the report output to a printer, or **B** to display the report output on your computer screen.
5. When you choose to print the report output, enter the appropriate device at the “Device:” prompt.

2.4.1.1 Sample Report

Figure 2-1 includes purchase orders signed between January 1, 2003 and November 17, 2003. The report output was sent to the computer screen.

This report includes the Purchase Order Number, Provider of Service, Signature Date, Signature Date, Ordering Official, Patient Name, Obligation Amount, Order Date, and Authorizing Official. When an Ordering Official has approved a purchase order, the report displays the name of the individual. Purchase orders with no Ordering Official signature do not display on this report. When an Authorizing Official has

approved a purchase order with a signature, the report displays the name of the individual; otherwise, the report displays Needs Auth. Ofc. Sig .

Note: If your site only requires one signature to approve purchase orders, you will only see the Ordering Official's name on this report. If your site requires multiple signatures to approve purchase orders, you will see both the Ordering and Authorizing Official's names, as well as "Needs Auth. Ofc. Sig" for purchase orders pending Authorizing Official signature.

DEMO, ORDERING OFFICIAL			Page 1
*** CONTRACT HEALTH MANNAGEMENT SYSTEM ***			
UNSPECIFIED TRIBE HEALTH CLINIC			
ELECTRONIC SIGNATURE REPORT			
Nov 17, 2003@10:57:30			
Purchase Orders with Electronic Signature			
During the Period of Jan 01, 2003 through Nov 17, 2003			
Document Number	Provider of Service	Sig Date	Ordering Official
Patient	Oligation Amt.	Order Dt.	Authorizing Official
=====			
4-017-00007	SPORTS MEDICINE SPECIALIST	110403	JOHN J JOHNS
DEMO,PATIENT	1,400.00	110403	SUE S SUESE
4-017-00008	HILLCREST MEDICAL CENTER	110403	JOHN J JOHNS
DEMO,PATIENT	2,800.00	110403	SUE S SUESE
4-017-00009	ADAMS RADIOLOGY ASSOCIATES	110403	JOHN J JOHNS
DEMO,PATIENT TOO	60.00	110403	SUE S SUESE
4-017-00010	DEAN MCGEE EYE INSTITUTE	110403	JOHN J JOHNS
DEMO,PATIENT	150.00	110403	SUE S SUESE
4-017-00011	HILLCREST MEDICAL CENTER	110403	JOHN J JOHNS
DEMO,PATIENT TOO	250.00	110403	SUE S SUESE
4-017-00004	HILLCRESTMEDICAL CENTER	110503	SUE S SUESE
DEMO,PATIENT	25,000.00	110303	NEEDS AUTH. OFC.SIG

Total Documents: 6			

Figure 2-28: Viewing signed purchase orders

2.4.2 Pending Electronic Signature of Ordering Official

This option allows you to create reports that include purchase orders that are awaiting an electronic signature approval from an Ordering Official

```
CONTRACT HEALTH MGMT SYSTEM, 3.1
UNSPECIFIED TRIBE HEALTH CLINIC
Electronic Signature Reports

ESAP   Electronic Signature approved by Ordering Official
ESPD   Pending Electronic Signature of Ordering Official

Select Electronic Signature Reports Option: ESPD
```

Figure 2-29: Using the Electronic Signature Reports menu (Step 1)

Creating and Viewing Purchase Orders Pending Approval

1. From the Electronic Signature Reports menu, type **ESPD** at the “Select Electronic Signature Reports Option:” prompt. The system displays the Pending Electronic Signature of Ordering Official report options, as shown in Figure 2-30.

```
Select one of the following:

      P          PRINT Output
      B          BROWSE Output on Screen

Do you want to : PRINT//  P
DEVICE: HOME//  <ENT>
```

Figure 2-30: Entering Pending Electronic Signature of Order Officials report options (Steps 2 and 3)

2. At the “Do You Want To:” prompt, type **P** to print the report output to a printer, or **B** to display the report output on your computer screen.
3. When you choose to print the report output, enter the appropriate device at the “Device:” prompt.

2.4.2.1 Report Example

The report shown in Figure 2-31 includes purchase orders awaiting electronic signature by an Ordering Official. This report includes the Purchase Order Number, Provider of Service, Issue Date, Obligation Amount, and Type. The report output was sent to the computer screen.

DEMO ORDERING OFFICIAL			Page 1	
*** CONTRACT HEALTH MANNAGEMENT SYSTEM ***				
UNSPECIFIED TRIBE HEALTH CLINIC				
PENDING ELECTRONIC SIGNATURE REPORT				
Nov 05, 2003@09:25:15				
Purchase Orders Pending for Electronic Signature				
Run date of Nov 05, 2003				
Document Number	Provider of Service	Issue Date	Obligation Amt.	Type
=====				
4-017-00019	HILLCREST MEDICAL CENTER	110503	175.00	Outpatient
4-017-00020	ADAMS ORTHODONTIC & PED. L	110503	175.00	Outpatient

Total Documents: 2				

Figure 2-31: Viewing pending purchase orders

2.4.2.2 Printed Purchase Order Example

The example shown in Figure 2-32 illustrates a printed purchase order with both Ordering Official and Authorizing Official E-Signatures.

		DCR:3	1. ORDER NO. 04 - 016 - 00018
2. PATIENT IDENTIFICATION DEMO, PATIENT 111111113 Fac: 555221 IHS#: 123456 01-01-1949M 061 001 293-20-40 Desc: Ear Exam		3. HEALTH INSURANCE a. Name of Policy Holder: b. Plan Name: c. Address: d. Policy No.: e. Coverage: f. Effective: g. Termination: h. Other Health Insurance Coverage:	
4. IHS ORDERING FACILITY DELAWARE TRIBE HEALTH CLINIC (555220) 3625 N.W. 56TH STREET OKLAHOMA CITY OK 73112			
5. HOSPITAL INPATIENT <input type="checkbox"/>		6. DENTAL <input type="checkbox"/>	
		7. OTHER THAN HOSPITAL INPATIENT OR DENTAL <input checked="" type="checkbox"/>	
8. ESTIMATED CHARGES \$75.00		9. FISCAL YEAR CAN J50AB75	
10. OBJECT CLASS CODE 25.6r			
REFERRAL AND AUTHORIZING INFORMATION			
11. AUTHORIZATION VALID (From) Nov 06, 2003 (To) Nov 16, 2003		13. REASON FOR REFERRAL	
12. SERVICES ORDERED SCC: 25.4J		14. REFERRING IHS PHYSICIAN --- 15. REFERRING IHS DENTIST 16. MEDICAL/DENTAL PRIORITY	
PRICING INFORMATION			
17. IHS NO. OF a. <input type="checkbox"/> Contract, b. <input type="checkbox"/> Agreement, or c. <input type="checkbox"/> Rate Quotation: Open Market			
18. DATE OF RATE QUOTATION (if applicable): ---			
19. RATE FOR AUTHORIZED SERVICES: a. <input type="checkbox"/> Medicare Rate, or b. <input type="checkbox"/> Other Rate (Specify):			
20. TITLE		21. SIGNATURE (IHS ordering official) JOHN JOHNS E-SIGNATURE	
		22. DATE SIGNED NOV 5, 2003	
23. PAYMENT IS HEREBY AUTHORIZED BY (IHS authorizing official) SUE SUES E-SIGNATURE		24. DATE SIGNED NOV 5, 2003	
		25. AMOUNT APPROVED \$75.00	
PROVIDER INSTRUCTIONS, IDENTIFICATION, AND CERTIFICATION			
26. PROVIDER TEST DOCTOR a. Name 1234 ANYPLACE b. Address OKLAHOMA CITY, OK 99999 c. Telephone Number () d. EIN No. 1010101010 e. UPIN No. ---			
27. PROVIDER CLASSIFICATION (Check appropriate boxes) a. <input type="checkbox"/> Small Business b. <input type="checkbox"/> Small Disadvantaged Business c. <input type="checkbox"/> Woman - Owned Small d. <input type="checkbox"/> Other			
28. INSTRUCTIONS If IHS has not completed Block 19 above, the provider should indicate its rate for the authorized services in that Block. It is IHS policy to pay Medicare rates or equivalent or lower rates for health care services. IHS has approved payment to you for services necessary to treat the patients immediate condition. Any additional services must be approved by the IHS authorizing official and may require an additional purchase-delivery order. The provider shall submit HCFA 1450-1500 or ADA Dental Form for payment to: _____ Additional instructions for submitting claims are included on the reverse side of this form, and the conditions and clauses pertaining to the order are included on the reverse side of Copy #3 of the purchase-delivery order.			
29. I certify that I have provided the authorized services:		SIGNATURE OF PROVIDER DATE	

Figure 2-32: Viewing a signed and printed purchase order

3.0 Patch 6

3.1 Appeal Status Edit (DAE)

This option allows for the addition and edit of the appeal status of patient appeals for payment reconsideration by IHS. You can track when the appeal entry was entered followed by its status (upheld, reversed etc.) and the respective appeal level (Local facility, Area, Headquarters). For Tribal programs, Second Level and Final Level were added for the various entities that consider the appeal in the typical Contract Health Service tri-level process.

Editing an Appeal Status

1. Type **DEN** at the “Select Contract Health System Option:” prompt.
2. Type **APP** at the “Select CHS Denial/Deferred Services Option:” prompt.
3. Type **DAE** at the “Select Denial Appeal Status Menu Option:” prompt.


```
*****
*           Indian Health Service           *
*      CONTRACT HEALTH MGMT SYSTEM          *
*      Version 3.1, Jun 11, 2001            *
*****

      DEMO TRIBE HEALTH CLINIC

DOC   Document Generation ...
PAY   Pay/Edit Documents ...
PRT   Document Printing ...
ACC   Account Balances ...
PT    Patient Data
VEN   Provider/Vendor Data
DIS   Display Documents ...
DCR   Document Control Register
MGT   Facility Management ...
DEN   CHS Denial/Deferred Services ...
XXXX  CHS Programmer Utilities

Select Contract Health System Option: DEN  CHS Denial/Deferred Services

*****
*           Indian Health Service           *
*      CONTRACT HEALTH MGMT SYSTEM          *
*      Version 3.1, Jun 11, 2001            *
*****

      DEMO TRIBE HEALTH CLINIC

ADD   Enter New Document(s) ...
CAN   Cancel Document ...
PAR   Parameters ...
PRT   Print Patient and/or Vendor Letters ...
REP   Reports ...
SUPP  Enter Supplemental Information ...
APP   Denial Appeal Status Menu ...

Select CHS Denial/Deferred Services Option: APP  Denial Appeal Status Menu

      CONTRACT HEALTH MGMT SYSTEM, 3.1
      DEMO TRIBE HEALTH CLINIC
      Denial Appeal Status Menu

DAE   Appeal Status Edit
DSE   Denial Status Edit

Select Denial Appeal Status Menu Option: DAE  Appeal Status Edit
```

Figure 3-1: Editing an appeal (steps 1-3)

4. Type the denial number or patient number at the “Enter the Denial Number or Patient:” prompt. The system will display the patient’s information.
5. Press the Return key at the “Is This Correct:” prompt if the patient information is correct. The system will then display the patient’s CHS denial document information.
6. Type 10 (APPEAL STATUS) at the “Enter Number Of Field To Edit or <RETURN> To Accept: (#-#):” prompt.

```

CONTRACT HEALTH MGMT SYSTEM, 3.1
  DEMO TRIBE HEALTH CLINIC
    Appeal Status Edit

Enter the DENIAL NUMBER or PATIENT: 000-OANY-3   ISS: 03/10/1997   SRV:
02/24/1997

You have chosen denial document 000-OANY-3

DEMO,PATIENT
123 S. Main
TULSA OK 74123

Date of service Feb 24, 1997

Is this correct? YES// [RET]

CHS DENIAL DISPLAY          PATIENT: DEMO,PATIENT          CHART#: NONE

=====
DENIAL NO: 000-OANY-3          DENIAL STATUS: Active
DATE ISSUED: Mar 10, 1997      ISSUED BY: ROGERS,DEMO

1. DATE MED SVC: Feb 20, 1996      2. DATE OF REQUEST: Mar 15, 1996
3. MEDICAL PRIORITY: I
4. VISIT TYPE: OUTPATIENT

5. PRIMARY PROVIDER:      DEMO MEDICAL CENTER HOSPITAL
6. SECONDARY PROVIDERS:  DEMOEMERGENCY PHYSICIANS
                        DEMO ARTS LABORATORY INC
                        DMSA

7. PRIMARY DENIAL REASON: EMER. SVC:NO APRVL W/IN 72 HRS
8. *OTHER RESOURCES: YES          9. *OTHER IHS RESOURCES: NONE
10. APPEAL STATUS: APPEAL PENDING      11. *APPEAL TRANSACTION RECORDS:
NONE
12. *CHS OFFICE COMMENTS: NONE
      * - CHOOSE THESE FIELDS TO SEE FURTHER INFORMATION

Enter Number Of Field To Edit or <RETURN> To Accept:  (8-12): 10

```

Figure 3-2: Editing an appeal (steps 4-6)

7. Type the date of the appeal transaction at the “Select Appeal Transaction Date:” prompt. If you are adding a new appeal transaction date, the system will prompt you to confirm your choice.
8. Type the appeal transaction status at the “Appeal Transaction Status:” prompt. Type ?? for a list of available options.

APPEAL TRANSACTION MENU

Select APPEAL TRANSACTION DATE: **APRIL 3 1997** APR 03, 1997

Are you adding 'APR 03, 1997' as
a new APPEAL TRANSACTION DATE (the 1ST for this DENIAL NUMBER)? No// **Y**
(Yes)

APPEAL TRANSACTION STATUS: **??**

Choose from:

- APPEAL PENDING
- PAYED WITH ADDITIONAL MONEY
- REVERSED AFTER APPEAL
- UPHELD AFTER APPEAL

APPEAL TRANSACTION STATUS: **REVERSED AFTER APPEAL**

Figure 3-3: Editing an appeal (steps 7-8)

9. Type the appeal level at the “Appeal Level:” prompt. Type ?? for a list of available options.
10. Type the date the appeal was resolved at the “Appeal Resolve Date:” prompt.
11. Type any comments relating to the appeal (50 characters max) at the “Appeal Comments:” prompt.
12. The system will then display the updated patient’s CHS denial document information.

```

APPEAL LEVEL: ??

Choose from:
  L      LOCAL SITE - SERVICE UNIT OR HEALTH DIRECTOR
  A      AREA OFFICE
  H      IHS HEADQUARTERS
  S      TRIBAL PROGRAMS (SECOND LEVEL)
  F      TRIBAL PROGRAMS (FINAL)
APPEAL LEVEL: A AREA OFFICE
APPEAL RESOLVE DATE: APRIL 3 1997 (APR 03, 1997)
APPEAL COMMENTS: WE HAVE REVERSED OUR DECISION
CHS DENIAL DISPLAY      PATIENT: DEMO,PATIENT      CHART#: NONE

=====
DENIAL NO: 000-OANY-3      DENIAL STATUS: Reversed
DATE ISSUED: Mar 10, 1997      ISSUED BY: ROGERS,DEMO L

1. DATE MED SVC: Feb 24, 1997      2. DATE OF REQUEST: Mar 05, 1997
3. MEDICAL PRIORITY: I
4. VISIT TYPE: OUTPATIENT

5. PRIMARY PROVIDER:      DEMO MEDICAL CENTER HOSPITAL
6. SECONDARY PROVIDERS:  DEMO EMERGENCY PHYSICIANS
                        DEMO ARTS LABORATORY INC
                        DMSA

7. PRIMARY DENIAL REASON: EMER. SVC:NO APRVL W/IN 72 HRS
8. *OTHER RESOURCES: YES      9. *OTHER IHS RESOURCES: NONE
10. APPEAL STATUS: REVERSED AFTER APPEAL  11. *APPEAL TRANSACTION RECORDS: 1
12. *CHS OFFICE COMMENTS: NONE
      * - CHOOSE THESE FIELDS TO SEE FURTHER INFORMATION

```

Figure 3-4: Editing an appeal (steps 7-11)

3.2 Denial Status Edit (DSE)

This option allows you to edit the status of a denial document. You have the option of Reversing, Canceling, or Activating the denial.

If you use the appeal menu to Reverse a denial then the Denial status will be updated accordingly. This option corrects unintentional cancels and reactivates the appeal.

Note: When the denial is active it means it is still upheld as a denial.

Editing a denial status

1. Type DSE at the “Select Denial Appeal Status Menu Option:” prompt.
2. Type the denial number or patient number at the “Enter the Denial Number or Patient:” prompt. The system will display the patient’s information.

3. Press the Return key at the “Is This Correct:” prompt if the patient information is correct. The system will then display the patient’s CHS denial document information.
4. The system will display the status of the appeal.

```
CONTRACT HEALTH MGMT SYSTEM
DEMO TRIBE HEALTH CLINIC
Denial Appeal Status Menu

DAE    Appeal Status Edit
DSE    Denial Status Edit

Select Denial Appeal Status Menu Option: DSE Denial Status Edit

CONTRACT HEALTH MGMT SYSTEM, 3.1
DEMO TRIBE HEALTH CLINIC
Denial Status Edit

Enter the DENIAL NUMBER or PATIENT:    000-OANY-2 ISS: 03/10/1997  SRV:
02/24/1997

You have chosen denial document 000-OANY-2

JONES, DEMO
BOX 1234
UNSPECIFIED OK 74027

Date of service Feb 24, 1997

Is this correct? YES// [RET]

THE STATUS OF THIS DENIAL IS ACTIVE
```

Figure 3-5: Editing a denial status (steps 1-4)

5. Type YES at the “Do You Want To Edit The Denial Status?” prompt.
6. Type C (Cancel), R (Reverse), or A (Activate) at the “Cancel, Reverse or Activate this denial? (C/R/A):” prompt.
7. The system will then prompt you to confirm your selection by typing YES at the “Are You Sure You Want To (your selection) This Denial? (Y/N)?” prompt.
8. The system will confirm that you have Canceled, Reversed, or Activated the denial.
9. Type any comments at the “CHS Office Comments:” prompt. When you are done typing comments, press the Escape key to exit and then press the Return key at the “EDIT Option:” prompt.

10. Press the Return key at the “Do You Want To Edit The Appeal Status? NO//” prompt. See section 3.1 to edit an appeal status.

11. Type another denial number or patient number at the “Enter the Denial Number or Patient:” prompt or press the Return key to exit this option.

```
DO YOU WANT TO EDIT THE DENIAL STATUS? NO// YES

Cancel,Reverse or Activate this denial? (C/R/A):  R

Are You Sure You Want To Reverse This Denial?

The status change will be recorded

Are You Sure You Want To Reverse This Denial? (Y/N)? NO// YES

Now Reversing Denial Number 000-OANY-2
Completed
Enter Notes

CHS OFFICE COMMENTS:
  1>REVERSED BY UNIT CHSO
  2> [ESC]
EDIT Option: [RET]

DO YOU WANT TO EDIT THE APPEAL STATUS? NO// [RET]
```

Figure 3-6: Editing a denial status (steps 5-11)

3.3 Send Approval Message to FI (FIM)

Use this option to eliminate the need for paper authorizations being sent to the Fiscal Intermediary (FI) for particular services such as sterilizations and other procedures in support of direct care. Upon issuing a purchase order authorization, you should use this option to send the approval via the Electronic Purchase order transmission to the FI. This option should be used immediately after issuing the purchase order.

Sending an approval message

1. Type DOC at the “Select Contract Health System Option:” prompt.
2. Type FIM at the “Select Document Generation Option:” prompt.

```

*****
*           Indian Health Service           *
*      CONTRACT HEALTH MGMT SYSTEM          *
*      Version 3.1, Jun 11, 2001            *
*****

      DEMO TRIBE HEALTH CLINIC

DOC   Document Generation ...
PAY   Pay/Edit Documents ...
PRT   Document Printing ...
ACC   Account Balances ...
PT    Patient Data
VEN   Provider/Vendor Data
DIS   Display Documents ...
DCR   Document Control Register
MGT   Facility Management ...
DEN   CHS Denial/Deferred Services ...
XXXX  CHS Programmer Utilities

Select Contract Health System Option: DOC Document Generation

      CONTRACT HEALTH MGMT SYSTEM, 3.1
      DEMO TRIBE HEALTH CLINIC
      Document Generation

ID    Initial Document
SUP   Supplemental
SBO   Special Blanket Obligation
CAN   Cancel Obligation
SLO   Special Local Obligations
REFM  Enter/Edit Referral Medical Data
278   X12 Transaction 278 Processing ...
FIM   Send Approval Message to FI

Select Document Generation Option: FIM Send Approval Message to FI

```

Figure 3-7: Sending an approval message (steps 1-2)

3. Type the document number at the “Select Document:” prompt. The system will display the document information.
4. Press the Return key to accept the default entry of *YES* at the “Do you want to send a EPO approval message to the FI?” prompt.

```
Select Document:  0-00003      10-25-99      OPEN      0

DOCUMENT: 0-00003      PATIENT NAME: DEMO,PATIENT
DATE OF SERVICE: NOV 08, 1999      APPROVAL MESSAGE(S) TO FI:

Do you want to send a EPO approval message to the FI? YES// [RET]
```

Figure 3-8: Sending an approval message (steps 3-4)

5. Type your message at the “CHS-FI Messages:” prompt. You can type ?? for a list of available options.
6. The system will then redisplay the document with the added approval message.
7. You may type another message at the “Do you want to send a EPO approval message to the FI?” prompt or type **NO** to exit this option.

```
Select CHS-FI MESSAGES: STERILIZATION// [RET]

DOCUMENT: 0-00003      PATIENT NAME: DEMO,PATIENT
DATE OF SERVICE: NOV 08, 1999      APPROVAL MESSAGE(S) TO FI:
                                   1. Sterilization

Do you want to send a EPO approval message to the FI? YES// NO
```

Figure 3-9: Sending an approval message (steps 5-7)

4.0 Patch 5

X12 Transaction 278 Processing Option

Patch 5 of the Contract Health System addresses issues related to recent HIPAA Title II requirements. To meet these requirements, this patch implements the X12 transaction set 278 for HIPAA transaction set compliance.

To manually send a 278 transaction:

1. Type DOC at the main CHS menu.
2. Type 278O (capital “o”) at the “Select Document Generation Option:” prompt.
3. Type 278O (capital “o”) at the “Select X12 Transaction 278 Processing Option:” prompt.
4. Follow the prompts as they appear on your screen.

```

CONTRACT HEALTH MGMT SYSTEM
      DEMO HOSP
X12 Transaction 278 Processing

278O   Manually Send a 278 Trans
Select X12 Transaction 278 Processing Option:  278O Manually Send a 278 Trans

Device: 76 Job no.: 21  Unix Device: /dev/pts/12  [UCI,VOL]: PRD,DSD

CONTRACT HEALTH MGMT SYSTEM, 3.1
      DEMO HOSP
Manually Send a 278 Trans
Select Document:  1-00001          08-27-01          CANCELED          1

-----
TRANS      TRANS
NUM      DATE      TYPE      AMOUNT
-----
      1      Aug 27, 2001  I          3,000.95  <INITIAL>
      2      Aug 27, 2001  CF         3,000.95  <CANCELTION>

Select a transaction:  (1-2): 1
Proceed with the send of the Outbound 278? Y// Y          ES

```

Figure 4-1: Patch 5 changes

5.0 Contact Information

If you have any questions or comments regarding this distribution, please contact the ITSC Help Desk by:

Phone: (505) 248-4371 or
(888) 830-7280

Fax: (505) 248-4199

Web: <http://www.rpms.ihs.gov/TechSupp.asp>

Email: ITSCHelp@mail.ihs.gov